JUN 1 4 1993 7

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| 1 CASE NUMBER H 93 930316CCC1274 | H 9320048 74 | | 2 INVESTIGATOR ID 3 OFFICE CODE 8 0 0 | | | | | | EPIDEMIOLOGIC | | | | | | | | | | | |
| 4 ACCIDENT DATE 9 3 0 2 0 7 | | 5 IDI 9 | | ITI O | ATI 4 | ED 1 2 | | | | | | | INVESTIGATION REPORT | | | | | | | |
| A toaster oven, wand one-half minuthe oven. The coinstructions cond | ras being ites. Th | g util ne cor feels | lize nsum tha | d a er t i | sme inac | 400 degraled buildequate value from | ees ar rning warnin m wall | nd p ng ls | had ain wa wa | d be tar s gi | een nd ive | tur tur n dis | n for ned on th | of: of: ne pred | opro f an prod ade | xim d u luct qua | ate inp] ar | ∍ly Luç nd | r fo | our d at |
| 7 LOCATION Home | | | | 1 | 0 | 8 CITY Nicev | ille | | - 1 | | | | | | 9 s | TAT | E | L | | |
| 10a FIRST PRODUCT Toaster Oven | | 0 | 2 | 1 | 6 | lla TRAB Black & Inc., 6 | Decke | er | To | aste | er | Ove | en, E | Blac | ck & | De | cke | er 4 | (U: | S), |
| 10b SECOND PRODUCT | | | | | | 11b TRA | DE/BRA | AN. | D N. | AME/ | /MO | DEI | | | | | | | | |
| None | | | | _ | _ | | None | | | | | | | | | | | | | |
| 12 AGE OF VICTIM 9 9 9 | 13 SEX | 9 | 1 | 4 I | | POSITION Injury | | | • | 0 | 1 | .5 1 | TULKI | RY I | DIAG | NOS | IS | | | 7 1 |
| 16 BODY PART No Injury | 9 9 | 17 RF | ESPO | | | | 1 | | 18 | INVE | EST | IG | MOITA | ı m | YPE 2 | | | rim O | | SPENT 0 |
| 20 ATTACHMENTS | | 21 (| CASE | sc | OUR | CE | | | 22 | REVI | IEW | ED | BY | | | | | | | |
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| 23 PERMISSION TO DI XXX CPSC may discl | SCLOSE 1 | NAMES name | (NO | N-N | NEI: | ss cases | | | may | not | t d | liso | close | e my | y na | ıme | | | | |
| 24 Narrative | | | | | | | | | 25 | REGI | ION | IAL | DIRE | ECT | OR R | EVI | EW | | | DATE |
| See Attached. | | | | | | | | L | | | | | | | | | | | _ | |
| | | | | | , | yez/27/17 | ~ \d |) ; · · . | 3 | . [/: | 12 | | 36 | - | | | | | | |
| | | | | | : | | Y | | : ::::3: : | Par Not 1 | taqi taqi | ed ns gest | ∌d • | _ | | | | | | |



930316CCC1274

PRE-ACCIDENT

The toaster oven was located on a kitchen counter in the home. The consumer states the oven was approximately two inches from the wall. This conflicts with the attached investigative report which states "the oven was in a position less than one inch from the wall". The toaster oven was purchased on February 1, 1993 and was six days old at the time of the incident.

ACCIDENT

The oven was operating at 400 degrees for about four and one-half minutes when the odor of burning paint alerted the complainant that something was wrong. The toaster oven was turned off and unplugged. The latex paint behind the oven showed signs of discoloration.

POST ACCIDENT

The complainant is a Law Enforcement Investigator with the Bureau of Fire and Arson Investigations, Department of Insurance, and feels that a better warning label should be on the unit concerning the location of the oven in relationship to the wall.

An investigation from the Bureau of Fire and Arson Investigations was conducted (Exhibit 1). The photos indicate the oven, location, and wall discolorations.

PRODUCT IDENTIFICATION

An attempt was made to examine the product, however, the original oven had been returned to the manufacturer and a replacement had been received. The wife of the complainant stated that the replacement heated in the same fashion as the original oven. She indicated she was not sure where the owners manual was but felt her husband may have it. She did confirm that the oven was a Black & Decker TR0200.

This investigator was able to obtain the user's manual for this model toaster (Exhibit 2). The manual mentions a fire hazard concerning the placement of the oven in relationship to the walls in two places. First on page 3 which states, "A fire may occur if the toaster oven is covered or touching flammable material, including curtains, draperies, walls and the like, when in operation." On page 5 the manual states, "Keep the oven at least 1" away from walls and rear of counter."

An Authorization for Release of Name (Exhibit 3) was obtained.

EXHIBITS

- Exhibit 1 Letter and photos dated April 14, 1993, addressed to Dee Keck from Scott Showalter, Division of State Fire Marshall's Office.
- Exhibit 2 Owner's Manual for a Black and Decker Toast-R-Oven toaster, Model Number TR0200.
- Exhibit 3 Copy of Assignment.
- Exhibit 4 Authorization for Release of Name from James C. Krieger.



930316CC1274 CHAHIBUT 1

OFFICE OF THE TREASURER

DEPARTMENT OF INSURANCE

The Capitol, Tallahassee, Florida 32399-0300

TOM GALLAGHER

TREASURER
INSURANCE COMMISSIONER
FIRE MARSHAL

Division of State Fire Marshal
Bureau of Fire & Arson Investigations
105 Lewis Street, Suite 103
Ft. Walton Beach, Florida 32547-3182
904/833-9125

April 14, 1993

Dee Keck
Division of Consumer Services
Mayo Building
Tallahassee, Florida 32399-0800

RE: James C. Krieger Toaster Oven

Dear Ms. Keck:

Enclosed is a proof sheet of the photographs I took at the home of James Krieger, involving subject oven. The problem occurred after Mr. Krieger used the oven for approximately four to five minutes. He noticed a stain on the wall behind the oven (Photo #4).

During my investigation, I found that the oven was in a position less than one inch from the wall. The owner's manual states that the oven should be at least two to three inches away from the wall. I also noted that there was no malfunction in the oven itself.

The minor damage occurred due to the oven being used too close to the wall and the heat coming out of the back of the oven (Photo #6), causing the discoloring of the wall.

Mr. Krieger is a Law Enforcement Investigator, Bureau of Fire & Arson Investigations, with our agency and he felt very strongly that:

1) there should be a better warning label on the unit, as far as how close the unit should be to a wall.

Afflowation Antion/Maunt Opposituation . . .

2/2

Ms. Dee Keck RE: Toaster Oven - James C. Krieger April 14, 1993 Page 2

2) if the unit is used improperly and the wall was covered with wallpaper, that a fire could occur due to heat transfer or radiated heat omitting from the back of the unit.

If I can be of further assistance, please feel free to contact me.

Sincerely,

Scott F. Showalter

Lieutenant

SFS:mef Enclosure State of Fl

93 03 16 CCC 1274 pm

ACCIDENT INVESTIGATION REQUEST FORM

| Document Number <u>432004840</u> | |
|--|-------------|
| Date of Incident 27193 Category I.D. SECTU4 | |
| Pollow-Up Requested Hazard Analysis Section 15 | |
| Type Follow-Op Requested Telephone Call OV On-Site | |
| Beadquarters Contact R. Ranchochum | |
| Assignment Message DIHIFY accipLIMK SOMAHIO. Obt W | ϖ |
| product. | |
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|)bs | |
| Person(B) to contact Tames Krieger 3/21/93 | |
| Niceville, FLO | |
| 904-729-7003 | |
| 833-9125 | |
| | |
| Guideline , | |
| | |
| | |
| Requested By 17 | |
| Task Number 9505/6 ((C) 12/9 | |
| Assigned to $N40$ Date $3/18/53$ | |
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| CPSC Prom 324 (2/90) | |

TC 2/ FEB 1 & 1993 93031646161612754. UNLY CONSUMER PRODUCT INCIDENT REPORT CX HA / 14. 2. PHONE NO. (HOME) 1. NAME OF RESPONDENT 904-833-9125 904-729-7063 James Krieger (st te fire marshal-FL) ZIP CODE STATE 4. CITY 3. STREET ADDRESS 32:78 FLNiceville 1402 23rd St. 5. DESCRIBE INCIDENT OR HAZARD, INCLUDING DATA ON INJURIES (USE 2ND PGE IF NEEDED Toaster oven had been on 4-1/2 minutes at 400 degrees when consumer smelled the odor of burning paint. Consumer checked oven and found the wall behind oven scorched. Consumer turned off and unplugged oven. The oven was approximately 2" away from the wall. There were no instructions specifying how far oven should be placed from a wall. The toaster oven can be mounted under-the-counter. -cont.-7. IF INJURY OR NEAR MISS OBTAIN AGE/SEX 8. IF VICTIM DIFFERENT FROM 6. DATE RESPONDENT, PROVIDE NAME O YR/N OF none AND DESCRIBE INJURY: INCIDENTS RELATIONSHIP none 2/7/93 none 10. BRAND NAME 9. DESCRIPTION OF PRODUCT Black and Decker 1500 watt electric toaster oven 12. MODEL, SERIAL NUMBERS 11. MFR/DISTRIBUTOR NAME, ADDR. & PHONE TRO200, 120 volts, 50-60 HZ Black and Decker Corp. 6 Armstrong Rd. 13. DEALER'S NAME, ADDRESS & PHONE Shelton, CT 06484 Kmart-203-926-3000 John Simms Parkway unknown Niceville, FL 32578 unknown 904-729-2244 unknown 15. PRODUCT PURCHASED NEW X USED 14. WAS THE PRODUCT DAMAGED, REPAIRED OR DATE PURCHASED 2/1/93 AGE 6 days NO x IF YES, BEFORE MCDIFIED? YES DESCRIBE: OR AFTER THE INCIDENT? 16. DOES PRODUCT HAVE WARNING ABELS? IF SO, NOTE: "If you need an extension cord because cord is not long amough (12" long), order it from B &)." 18. IS THE PRODUCT STILL 19. 4AY WE 17. HAVE YOU CONTACTED THE USE YOUR NAME x AVAILABLE? YES X ИО MANUFACTURER? YES IF NOT, DO YOU PLAN TO CONTACT IF NOT, ITS DISPOSITION WITH THIS REPURT? x NO: OTHER? THEM? YES YES ИО FOR ADMINISTRATION USE 22. DOCUMENT NO. RECEIVED BY (NAME & OFFICE) 21. 20. DATE RECEIVED H32004: A0 1dm, HL 02/08/93 24. PRODUC! CODE(S) FOLLOW-UP ACTION 23. ENDORSER'S NAME & TITLE

CPSC FORM 175 (9/89)

CONSUMER PRODUCT INCIDENT REPORT

930316CCC 1274 CKHIRLTH3200 8A0

.oaster oven is UL listed.

Consumer found CPSC hotline telephone number in the phonebook.

930316CCC1274 _ LX141BLT 4

U.S.CONSUMER PRODUCT SAFETY COMMISSION ORLANDO RESIDENT POST 7200 LAKE ELLENOR DRIVE - SUITE 246 ORLANDO FLORIDA 32809-5742 PH (407)-648-6261

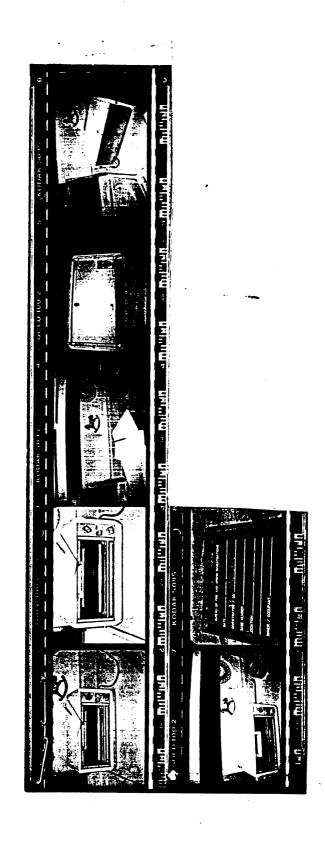
AUTHORIZATION FOR RELEASE OF NAME

Thank you for assisting us in collecting information on a potential product safety problem. The Consumer Product Safety Commission depends on concerned people to share product safety information with us. We maintain a record of this information, and use it to assist us in identifying and resolving product safety problems.

We routinely forward this information to manufacturers and private labelers to inform them of the involvement of their product in an accident situation. We also give the information to others requesting information about specific products. Manufacturers need the individual's name so that they can obtain additional information on the product or accident situation.

Would you please indicate on the bottom of this page whether you will allow us to disclose your name. If you request that your name remain confidential, we will of course, honor that request. After you have indicated your preference, please sign your name and date the document on the lines provided.

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|---|--|
| X | You are hereby authorized to disclose my name and address with the information collected on this case. |
| | My Identity is to remain confidential. |
| • | |



BLACK & DECKER®

